PTO/SB/06 (07-06)

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PATENT APPLICATION FEE DETERMINATION RECORD Substitute for Form PTO-875							Application or Docket Number 10/549,642			ing Date 20/2005	To be Mailed	
APPLICATION AS FILED – PART I (Column 1) (Column 2)							SMALL ENTITY			OTHER THAN OR SMALL ENTITY		
Н	FOR	l N	NUMBER FILED		NUMBER EXTRA		RATE (\$)	FEE (\$)	T	RATE (\$)	FEE (\$)	
	BASIC FEE (37 CFR 1.16(a), (b), (-	N/A	LD NO	N/A		N/A	TEE (a)	1	N/A	TEE (0)	
┢	SEARCH FEF	or (c))	N/A		N/A		N/A		1	N/A		
H	(37 CFR 1.16(k), (i), (ii)		N/A		N/A		N/A		ł	N/A		
	(37 CFR 1.16(o), (p), r TAL CLAIMS	or (q))	minus 20 =				x \$ =		OR	x s =		
INE	CFR 1.16(i)) EPENDENT CLAIM	s	minus 3 = *			ł	x s =		1	x s =		
	CFR 1.16(h)) APPLICATION SIZE	shee	If the specification and drawings exc sheets of paper, the application size is \$250 (\$125 for small entity) for ea			İ			1			
	(37 CFR 1.16(s))	addit	ional 50 s	thereof, See CFR 1.16(s).								
	MULTIPLE DEPENDENT CLAIM PRESENT (37 CFR 1.18(j))]			
* If	* If the difference in column 1 is less than zero, enter "0" in column 2.]	TOTAL		
APPLICATION AS AMENDED – PART II OTHER THAN												
L		(Column 1)		(Column 2)	, ,		SMAL	L ENTITY	OR	SMA	ALL ENTITY	
AMENDMENT	09/25/2008	CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA		RATE (\$)	ADDITIONAL FEE (\$)		RATE (\$)	ADDITIONAL FEE (\$)	
	Total (37 CFR 1.16())	* 9	Minus	 20	= 0	1	x \$ =		OR	X \$50=	0	
	Independent (37 CFR 1.16(h))	• 2	Minus	 3	= 0	1	x \$ =		OR	X \$210=	0	
	Application Size Fee (37 CFR 1.16(s))											
_	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.18(j))								OR			
							TOTAL ADD'L FEE		OR	TOTAL ADD'L FEE	0	
(Column 1) (Column 2) (Column 3)												
AMENDMENT		CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA		RATE (\$)	ADDITIONAL FEE (\$)		RATE (\$)	ADDITIONAL FEE (\$)	
	Total (37 CFR 1.1601)		Minus		=	1	x \$ =		OR	x s =		
ă	Independent (37 CFR 1,16(h))		Minus	***	=]	x \$ =		OR	x s =		
ä	Application Size Fee (37 CFR 1.16(s))]]			
AM	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.18(j))					1			OR			
									OR	TOTAL ADD'L FEE		
If the entry in column 1 is less than the entry in column 2, write "0" in column 3. Legal Instrument Examiner: "If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "20". "If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3". The "Highest Number Previously Paid For" (Total or independent) is the highest number found in the appropriate box in column 1.												

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